

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/55395D

FILING DATE

30 SEP 2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2			/			
3	/		/			
4	2		/			
5	1					
6	1		/			
7	1		/			
8	1		/			
9	1					
10	1		/			
11	1		/			
12	1		/			
13	2		/			
14	1		/			
15	1		/			
16	1		/			
17	1		/			
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TOTAL IND.	/	↓	/	↓		↓
TOTAL DEP.	20	←	18	←		←
TOTAL CLAIMS	21		19			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			↓		↓	↓
TOTAL DEP.		←		←	←	←
TOTAL CLAIMS						